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Bib Data Sheet

CONFIRMATION NO. 9239

SERIAL NUMBER 10/816,443	FILING DATE 03/31/2004  RULE	CLASS 280	GROUP ART UNIT 3616	ATTORNEY DOCKET NO. 5703.00047
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

None

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/10/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 3	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature			

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## TITLE

Head side airbag cushion fold

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